



Atty Dkt No. PP19199.002
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PATENT

IFW

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11/15/04
Date

Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

ARCANGEL et al.

Confirmation No.: 7355

Serial No.: 10/658,782

Art Unit: 1648

Filing Date: September 8, 2003

Examiner: M. McGaw

Title: HCV ASSAY

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is an amendment in the above patent application in response to the Office Action of August 13, 2004.

☐ Applicants request an extension of time for months. Enclosed is a check to cover the \$ fee.

☐ No additional fee is required.

☒ Also enclosed: Declaration of Inventorship, IDS and PTO/SB/08A with 2 References, Check for \$180 and a Return Postcard.

No. of Claims After Amendment			Most Claims Previously Paid			Extra Claims			Additional Fee	
A. Total Claims	26	-	32	=	0	x	\$18	=	\$0	
B. Ind. Claims	2	-	4	=	0	x	\$88	=	\$0	
C. If amended to contain multiple dependent claims, add 300								\$300	=	\$0
D. Total Amendment Fee (Total of A, B & C)									=	\$0
E. If small entity, 50% reduction of Total Amendment Fee (50% of D)									=	\$0
F. Total Amendment Fee (D minus E)									=	\$0

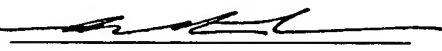
___ A check for \$ to cover the extension of time fee and extra claims fee is attached.

___ Charge \$ to Deposit Account No. 18-1648.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 which may be required by this paper, or to credit any overpayment, to Deposit Account No. 18-1648.

Respectfully submitted,

Date: 11/15/04

By: 
Roberta L. Robins
Registration No. 33,208
Attorney for Applicants

Chiron Corporation
Intellectual Property – R440
PO Box 8097
Emeryville, CA 94662-8097
Telephone: 510-923-8406
Facsimile: 510-655-3542